

<b>United States Bankruptcy Court Eastern District of New York</b>				<b>Voluntary Petition</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>MRI RESOURCES, INC.</b>			Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN(if more than one, state all): <b>11-2885627</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN(if more than one, state all):		
Street Address of Debtor (No. & Street, City, and State): <b>4277 HEMPSTEAD TURNPIKE BETHPAGE, NY</b>			Street Address of Joint Debtor (No. & Street, City, and State):		
ZIP CODE <b>11714</b>			ZIP CODE		
County of Residence or of the Principal Place of Business: <b>SUFFOLK</b>			County of Residence or of the Principal Place of Business:		
Mailing Address of Debtor (if different from street address): <b>C/O SONIX MEDICAL RESOURCES, INC. 150 MOTOR PARKWAY HAUPPAUGE, NY</b>			Mailing Address of Joint Debtor (if different from street address):		
ZIP CODE <b>11788</b>			ZIP CODE		
Location of Principal Assets of Business Debtor (if different from street address above):					
ZIP CODE					
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____		<b>Nature of Business</b> (Check one box) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.)		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input checked="" type="checkbox"/> Chapter 11  <input type="checkbox"/> Chapter 12  <input type="checkbox"/> Chapter 13             </div> <div> <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding             </div> </div> <b>Nature of Debts</b> (Check one box)  <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose."             </div> <div> <input checked="" type="checkbox"/> Debts are primarily business debts.             </div> </div>	
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b) See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			<b>Chapter 11 Debtors</b>  <b>Check one box:</b>  <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b>  <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. ----- <b>Check all applicable boxes</b>  <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
<b>Statistical/Administrative Information</b>  <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <div style="display: flex; justify-content: space-between;"> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between;"> <div>1- 49</div> <div>50- 99</div> <div>100- 199</div> <div>200- 999</div> <div>1,000- 5,000</div> <div>5,001- 10,000</div> <div>10,001- 25,000</div> <div>25,001- 50,000</div> <div>50,001- 100,000</div> <div>Over 100,000</div> </div>					

## Estimated Assets

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

## Estimated Liabilities

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>MRI RESOURCES, INC.</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <input checked="" type="checkbox"/> <b>Not Applicable</b> Signature of Attorney for Debtor(s) _____ Date _____	
<b>Exhibit C</b>			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b>			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following).  <div style="text-align: right; margin-right: 100px;">         _____          (Name of landlord that obtained judgment)       </div> <div style="text-align: right; margin-right: 100px;">         _____          (Address of landlord)       </div>			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>MRI RESOURCES, INC.</b>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p><del>I declare under penalty of perjury that the information provided in this petition is true and correct.</del></p> <p><del>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</del></p> <p><del>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</del></p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> <b>Not Applicable</b></p> <p>Signature of Debtor _____</p> <p><input checked="" type="checkbox"/> <b>Not Applicable</b></p> <p>Signature of Joint Debtor _____</p> <p>Telephone Number (If not represented by attorney) _____</p> <p>Date _____</p> <p><input checked="" type="checkbox"/> <b>Signature of Attorney</b></p> <p>Signature of Attorney for Debtor(s) _____</p> <p><b>A. MITCHELL GREENE Bar No.</b></p> <p>Printed Name of Attorney for Debtor(s) / Bar No.</p> <p><b>Robinson Brog Leinwand Greene Genovese</b></p> <p>Firm Name</p> <p><b>1345 Avenue Of The Americas New York, NY 10105</b></p> <p>Address</p> <p><b>212-603-6300</b></p> <p>Telephone Number</p> <p><b>October 15, 2009</b></p> <p>Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p><del>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</del></p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><input checked="" type="checkbox"/> <b>Not Applicable</b></p> <p>(Signature of Foreign Representative) _____</p> <p>(Printed Name of Foreign Representative) _____</p> <p>Date _____</p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><input checked="" type="checkbox"/> <b>Signature of Authorized Individual</b></p> <p><b>JOHN J. COLBERT</b></p> <p>Printed Name of Authorized Individual</p> <p><b>VICE PRESIDENT</b></p> <p>Title of Authorized Individual</p> <p>Date _____</p>	<p style="text-align: center;"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p><b>Not Applicable</b></p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer _____</p> <p>Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) _____</p> <p>Address _____</p> <p><input checked="" type="checkbox"/> <b>Not Applicable</b></p> <p>Date _____</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. _____</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. _____</p> <p>If more than one person prepared this document, attach to the appropriate official form for each person. _____</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 136.</i></p>

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK**

**In Re:**

**MRI RESOURCES, INC.**

**Debtor.**

**Chapter 11**

**Case No.:**

**CERTIFICATE OF RESOLUTION**

I, the undersigned, **JOHN J. COLBERT**, Vice-President of **MRI RESOURCES, INC.**, (the "Corporation"), do hereby certify that at a meeting of the Board of Directors of the Corporation duly called and held on October 14, 2009, the following resolutions were adopted and recorded in the Minute Book of the Corporation, and they have not been modified or rescinded, and are still in full force and effect:

**"RESOLVED**, that in the judgment of the Board of Directors it is desirable and in the best interest of the Corporation, its creditors, stockholders and other interested parties, that a petition be filed by the Corporation for relief under Chapter 11 of title 11 of the United States Code (the "Bankruptcy Code"); and it is further

**"RESOLVED**, that the form of petition under Chapter 11 presented to this meeting is approved and adopted in all respects, and that John J. Colbert, Vice-President, is authorized to execute and verify a petition substantially in such form and to cause the same to be filed with the United States Bankruptcy Court for the Eastern District of New York at such time as he shall determine; and it is further

**"RESOLVED**, that John J. Colbert, Vice-President, is authorized to execute and file all petitions, reorganization schedules, lists and other papers and to effectuate the filing of the Chapter 11 case, and, in that connection, that the firm of Robinson

Brog Leinwand Greene Genovese & Gluck P.C. be retained and employed as legal counsel for the Corporation under a general retainer, in addition to such special counsel as may hereafter become necessary or proper with a view to the successful conclusion of such Chapter 11 case."

IN WITNESS WHEREOF, I have hereunto set my hand and seal of the Corporation this  
15<sup>th</sup> day of October, 2009.

  
\_\_\_\_\_  
JOHN L. COLBERT, Vice-President

**United States Bankruptcy Court  
Eastern District of New York**

In re **MRI RESOURCES, INC.**

Debtor

Case No. \_\_\_\_\_

Chapter **11**

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
<b>GE HEALTHCARE FINANCIAL SER.</b>				<b>\$400,465.20</b>
<b>HITACHI MEDICAL SYSTEMS 1959 SUMMIT COMMERCE PARK ATTN: GAY WYNN TWINSBURG, OH</b>				<b>\$16,293.76</b>
<b>HOLOGIC INC. 24506 NETWORK PLACE CHICAGO, IL</b>				<b>\$13,042.46</b>
<b>MEDRAD INC. PO BOX 360172 PITTSBURGH, PA</b>				<b>\$9,138.99</b>
<b>JEFFERSON MEDICAL &amp; IMAGING 5470 BERKSHIRE VALLEY RD OAK RIDGE, NJ</b>				<b>\$8,447.55</b>

In re **MRI RESOURCES, INC.**

Case No. \_\_\_\_\_

Debtor

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, gov- ernment contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	(5) <i>Amount of claim [if secured also state value of security]</i>
<b>CONFIRMA INC 11040 MAIN STREET SUITE 100 BELLEVUE, WA</b>				<b>\$7,785.86</b>
<b>ASD HEALTHCARE PO BOX 848104 DALLAS, TX</b>				<b>\$7,262.50</b>
<b>LIPA PO BOX 9039 HICKSVILLE, NY 11802</b>				<b>\$4,976.81</b>
<b>MERGE TECHNOLOGIES, INC. 6737 W. WASHINGTON STREET SUITE 2250 MILWAUKEE, WI</b>				<b>\$3,691.08</b>
<b>AMERICAN COLLEGE OF RADIOLOGY 1891 PRESTON WHITE DRIVE RESTON, VA</b>				<b>\$2,600.00</b>
<b>HITACHI CAPITAL AMERICA CORP. 21925 NETWORK PLACE LEASE # 30329-001 CHICAGO, IL</b>				<b>\$2,390.44</b>



In re **MRI RESOURCES, INC.**

Debtor

Case No. \_\_\_\_\_

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
NEW HORIZONS COMMUNICATIONS 420 BEDFORD ST SUITE 250 LEXINGTON, MA 02420				\$2,231.07
WB MASON CO IN 21 COMMERCE DRIVE ATTN: JULIO CARRERAS CRANBURY, NJ				\$2,084.53
LI YELLOW CAB CORP. 100 NEW SOUTH ROAD HICKSVILLE, NY				\$1,470.00
OFFICE DEPOT PO BOX 633211 CINCINNATI, OH				\$1,201.74
SB LANDSCAPING 811 BROMPTON DRIVE WESTBURY, NY				\$977.62
LUCY DITIZIO 33 VIRGINIA AVENUE PLAINVIEW, NY				\$900.00

In re MRI RESOURCES, INC.

Debtor

Case No. \_\_\_\_\_

Chapter 11**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, gov- ernment contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim [if secured also state value of security]
ST. JOHN COMPANIES, INC PO BOX 51263 LOS ANGELES, CA				\$704.78
PHYSICIAN SALES & SERVICE INC. 208 PASSAIC AVENUE FAIRFIELD, NJ				\$688.11
MEDLINE INDUSTRIES, INC. PO BOX 382075 PITTSBURGH, PA				\$685.85

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, JOHN J. COLBERT, VICE PRESIDENT of the Corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date:

October 15, 2009

Signature:

JOHN J. COLBERT, VICE PRESIDENT

(Print Name and Title)

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

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\_\_\_\_\_  
In Re:

MRI RESOURCES, INC.

Case No.


Chapter 11


Debtor(s)  
\_\_\_\_\_x

**VERIFICATION OF CREDITOR MATRIX/LIST OF CREDITORS**

The undersigned debtor(s) or attorney for the debtor(s) hereby verifies that the creditor matrix/list of creditors submitted herein is true and correct to the best of his or her knowledge.

Dated: *October 15, 2009*

  
\_\_\_\_\_  
JOHN J. COLBERT  
Debtor

  
\_\_\_\_\_  
A. MITCHELL GREENE  
Attorney for Debtor

ADVANCED HEALTHCARE RESOU  
201 MORELAND RD  
HAUPPAUGE, NY 11788

ADVANCED HEALTHCARE RESOU  
201 MORELAND RD, STE 1  
HAUPPAUGE, NY 11788

ALL ISLAND IRRIGATION, IN  
200 CENTRAL AVENUE  
FARMINGDALE, NY

AMERICAN COLLEGE OF RADIO  
1891 PRESTON WHITE DRIVE  
RESTON, VA

ASD HEALTHCARE  
PO BOX 848104  
DALLAS, TX

ASTARITA ASSOCIATES INC.  
414 ROUTE 111  
SMITHTOWN, NY

BRICK RESOURCES INC.  
455 JACK MARTIN BLVD.  
BRICK, NJ 08724

BRICK RESOURCES, INC.  
455 JACK MARTIN BLVD  
BRICK, NJ 08724

CATAPANO'S GOURMET ITALIA  
326 BROADWAY  
BETHPAGE, NY

CIT HEALTHCARE LLC  
AS ADMINISTRATIVE AGENT  
305 FELLOWSHIP RD  
SUITE 300  
MOUNT LAUREL, NJ 08054

CONFIRMA INC  
11040 MAIN STREET  
SUITE 100  
BELLEVUE, WA

DVI CAPITAL COMPANY  
6611 ROCKSIDE RD  
SUITE 110  
INDEPENDENCE, OH 44131

GE HEALTHCARE FINANCIAL S

GE MEDICAL SYSTEMS  
PO BOX 96483  
CHICAGO, IL

GENERAL ELECTRIC CAPITAL  
PO BOX 414  
MILWAUKEE, WI 53201

GENERAL ELECTRIC COMPANY  
PO BOX 414  
MILWAUKEE, WI 53201

HITACHI CAPITAL AMERICA C  
800 CONNECTICUT AVE.  
NORWALK, CT 06854

HITACHI CAPITAL AMERICA C  
21925 NETWORK PLACE  
LEASE # 30329-001  
CHICAGO, IL

HITACHI MEDICAL SYSTEMS  
1959 SUMMIT COMMERCE PARK  
ATTN: GAY WYNN  
TWINSBURG, OH

HOLOGIC INC.  
24506 NETWORK PLACE  
CHICAGO, IL

IMAGING FINANCIAL SERVICE  
100 KINGS HIGHWAY S.  
ROCHESTER, NY 14617

JEFFERSON MEDICAL & IMAGI  
5470 BERKSHIRE VALLEY RD  
OAK RIDGE, NJ

JOHN J. PRIBISH  
BLANK ROME LLP  
405 LEXINGTON AVENUE  
10174

LI YELLOW CAB CORP.  
100 NEW SOUTH ROAD  
HICKSVILLE, NY

LIPA  
PO BOX 9039  
HICKSVILLE, NY 11802

LOYAL BUSINESS MACHINES  
980 SUNRISE HIGHWAY  
W.BABYLON, NY

LUCY DITIZIO  
33 VIRGINIA AVENUE  
PLAINVIEW, NY

MASTERS MECHANICAL CORP.  
75 VERDI STREET  
FARMINGDALE, NY

MEDLINE INDUSTRIES, INC.  
PO BOX 382075  
PITTSBURGH, PA

MEDRAD INC.  
PO BOX 360172  
PITTSBURGH, PA

MEDVANCE RESOURCES, INC.  
430 E. 59TH STREET  
NEW YORK, NY 10022

MERGE TECHNOLOGIES, INC.  
6737 W. WASHINGTON STREET  
SUITE 2250  
MILWAUKEE, WI

NEW HORIZONS COMMUNICATIO  
420 BEDFORD ST  
SUITE 250  
LEXINGTON, MA 02420

OFFICE DEPOT  
PO BOX 633211  
CINCINNATI, OH

PATCHOGUE PRINTING INC.  
23 HAVENS AVENUE  
PATCHOGUE, NY

PHYSICIAN SALES & SERVICE  
208 PASSAIC AVENUE  
FAIRFIELD, NJ

PUBLIC STORAGE INC.  
4040 HEMPSTEAD TPKE.  
BETHPAGE, NY

ROCKFORD INDUSTRIES, INC.  
1851 E. 1ST STREET  
SUITE 600  
SANTA ANA, CA 92705

SB LANDSCAPING  
811 BROMPTON DRIVE  
WESTBURY, NY

SOUTH MEDICAL RESOURCES,  
7001 113TH STREET, APT 1-J  
FOREST HILLS, NY 11375

SOUTH MEDICAL RESOURCES,  
7001 113TH STREET, APT 1-  
FOREST HILLS, NY 11375

ST. JOHN COMPANIES, INC  
PO BOX 51263  
LOS ANGELES, CA

STONY ACQUISITIONS, INC.  
1500 NESCONSET HWY  
STONY BROOK, NY 11790

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SUBURBAN EXTERMINATING SV  
879 JERICHO TPKE  
SMITHTOWN, NY



TOM'S RIVER RESOURCES  
19 MULE RD  
TOMS RIVER, NJ 08755

TOM'S RIVER RESOURCES, IN  
MULE RD  
TOMS RIVER, NJ 08755

TOTOWA SYSTEMS INC.  
PO BOX 696  
TOTOWA, NJ

U.S. BANK TRUST NA  
AS CUSTODIAN OR TRUSTEE  
180 5TH STREET E.  
ST. PAUL, MN 55101

US BANK TRUST NA  
60 LIVINGSTON AVENUE  
ST. PAUL, MN 55107

WB MASON CO IN  
21 COMMERCE DRIVE  
ATTN: JULIO CARRERAS  
CRANBURY, NJ

WINTER BROS RECYCLING  
1198 PROSPECT AVENUE  
WESTBURY, NY 11590